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06/12/2007

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Certificate of Mailing of Transmission

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Veronica Yoon	(Depositor's name)
Slounion	(Signature)
August 17, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/632,123	07/30/2003	David Murray Banks	B-5182 621126-9	1855

TITLE OF INVENTION: IDENTIFYING UNCORRECTABLE CODEWORDS IN A REED-SOLOMON DECODER FOR ERRORS AND ERASURES

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	09/12/2007	
EXAM	MINER	ART UNIT	CLASS-SUBCLASS]	•		
CHASE, SHELLY A 2112		. 2112	714-784000	•			
1. Change of correspond CFR 1.363).	lence address or indicatio	n of "Fee Address" (37	2. For printing on the p				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
							3. ASSIGNEE NAME A
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSI			(B) RESIDENCE: (CITY				
Hewlett-Pac	ckard Develop	ment Company	, L.P.	Houston, T	'exas		
Please check the appropr	riate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖾 Corporati	on or other private group	entity Government	
4a. The following fee(s)	are submitted:	. 48	p. Payment of Fee(s): (Plea	se first reapply any prev	iously paid issue fee sho	own above)	
Issue Fee			A check is enclosed.		• •	,	
	No small entity discount p		Payment by credit card. Form PTO-2038 is attached.				
Advance Order -	# of Copics		The Director is hereby authorized to charge the required (cc(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-2025 (enclose an extra copy of this form).				
5. Change in Entity Sta	tus (from status indicated	l above)		· · · · · · · · · · · · · · · · · · ·			
a. Applicant claim	s SMALL ENTITY statu	s. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMALL ENT	TTY status. See 37 CFR	1.27(g)(2).	
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Authorized Signature	2056	A8000		Date August	17, 2007		
Typed or printed nam	***			Registration No.	43,010		
This collection of inform	nation is required by 37 C	FR 1.311. The informatio	n is required to obtain or re	ctain a benefit by the publi	c which is to file (and by	the USPTO to process)	

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